Damage Survey for 2023 January Storm

This is not an application for assistance. The purpose of this document is to gather damage information in order to assess the level of assistance.

If submitting for multiple properties, please submit a form for each property.

To submit this document please scan and email: <u>DisasterRecovery@so.cccounty.us</u>
Or mail it to: OES Disaster Recovery 1850 Muir Road, Martinez 94553

Name:		
Damaged Property Address:	Temporary Mailing Address:	
Contact Number: ()	Email:	
Please specify: □ Owner □ Renter		
☐ Primary Residence ☐ Rental Property ☐	I Secondary Residence □ Business	
If this is your secondary residence, is the prope	erty used as a vacation rental? Yes No	
Pre-Disaster Estimated Property Value: \$		
Disaster Damage Estimated Costs: \$		
Briefly Describe Damage (such as, completely	y destroyed, inaccessible, etc.):	
Insurance Coverage: (such as, Homeowner's	Insurance or Rental Insurance)	
Was the property insured?		
Flood Insurance?		
Amount of coverage for real property?		
Amount of coverage for personal property?		
Does your policy include Additional Living Ex	apenses (ALE)?	
Please answer the following:		
1. Was the property used as a home busine	ess?	

2.	Are you unemployed or have you lost your income as a result of this disaster? Yes No
	If yes, please explain:
3.	Have you been able to obtain copies of vital records that may have been destroyed? (i.e., birth certificates, driver's license, vehicle registrations, etc.)
4.	What is your greatest concern(s) at this time?
5.	If applicable, would you like to be contacted by non-profit agencies that may assist with Long Term Recovery Efforts? Yes No